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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS**

Application Number	10/518,088					
Filing Date	12/16/2004 Leif Andersson					
First Named Inventor						
Art Unit	3662					
Examiner Name	ALSOMIRI, ISAM A					
Attorney Docket Number	074600					

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450										
Please withdraw me as attorney or agent for the above identified patent application, and										
all the attorneys/agents of record.										
the attorneys/agents (with registration numbers) listed on the attached paper(s), or										
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.										
The reasons for this request are: We no longer represent the applicant.										
CORRESPONDENCE ADDRESS										
1, Tr	ie corresponde	ence address is NOT affected by this	withdra	wal.						
2. Change the correspondence address and direct all future correspondence to:										
The address associated with Customer Number:										
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	m <i>or</i> lividual Name	Harness, Dickey and Pierce, P.L.C.								
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City Reston State VA						Zip	20190			
Country USA										
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date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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